

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO

John Schilstra
56332 Cedar Dr.
Bend, Or. 97707

SPACE ABOVE THIS LINE FOR RECORDER'S USE

			ALL
			PIN

Title Order No. _____
Escrow or Loan No. _____

QUITCLAIM DEED

THE UNDERSIGNED GRANTOR(S) DECLARE(S)

DOCUMENTARY TRANSFER TAX IS \$ _____ CITY TAX \$ _____

- computed on full value of property conveyed, or
- computed on full value less value of liens or encumbrances remaining at time of sale,
- Unincorporated area. City of _____ and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Kristin P. Reynolds
hereby remise, release and forever quitclaim to John, John III, Shirley, Schilstra
the following described real property in the County of Klamath State of Oregon
Oregon

Lot 28 Block 6 Tract No 1090 Wagon Tract
Acres .01, Second Addition

Tax account # 2309 00100 06100 128819

Dated 3-8-94

STATE OF CALIFORNIA
COUNTY OF El Dorado } ss.

On 8TH MARCH 1894 before me,

GERALD W. MERRIAM
personally appeared JOHN SCHILSTRA AND
JOHN SCHILSTRA III

personally known to me (or proved to me on the basis of satisfactory
evidence) to be the person(s) whose name(s) is/are subscribed to the
within instrument and acknowledged to me that he/she/they executed
the same in his/her/their authorized capacity(ies); and that by his/her/
their signature(s) on the instrument the person(s), or the entity upon
behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature Gerald W. Merriman

(This area for official notarial seal)



11-10451 (94)

MAIL TAX STATEMENTS AS DIRECTED ABOVE

EL DORADO COUNTY, CALIFORNIA

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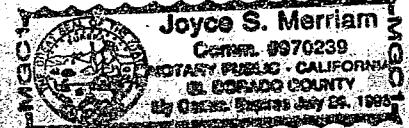
ALL-PURPOSE ACKNOWLEDGMENT

State of CALIFORNIA
County of EL DORADO

On Mar 8, 1994 before me, JOYCE S. MERRIAM
NAME, TITLE OF OFFICER - E.G. "JANE DOE, NOTARY PUBLIC"

personally appeared SHIRLEY SCHILSTRA
NAME(S) OF SIGNER(S)

personally known to me - OR - proved to me on the basis of satisfactory evidence
to be the person(s) whose name(s) is/are
subscribed to the within instrument and ac-
knowledged to me that he/she/they executed
the same in his/her/their authorized
capacity(ies), and that by his/her/their
signature(s) on the instrument the person(s),
or the entity upon behalf of which the person(s)
acted, executed the instrument.



Witness my hand and official seal.

Joyce S. Merriam
SIGNATURE OF NOTARY

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to unauthorized document.

THIS CERTIFICATE
MUST BE ATTACHED
TO THE DOCUMENT
DESCRIBED AT RIGHT:

Title or Type of Document QUITCLAIM DEED
Number of Pages 1 Date of Document 3-8-94
Signer(s) Other Than Named Above JOHN SCHILSTRA III

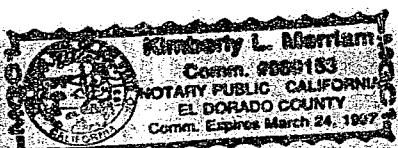
ALL-PURPOSE ACKNOWLEDGMENT

State of California
County of El Dorado

On 3-9-94 before me, Kimberly L. Merriam
NAME, TITLE OF OFFICER - E.G. "JANE DOE, NOTARY PUBLIC"

personally appeared Kristin Reynolds
NAME(S) OF SIGNER(S)

personally known to me - OR - proved to me on the basis of satisfactory evidence
to be the person(s) whose name(s) is/are
subscribed to the within instrument and ac-
knowledged to me that he/she/they executed
the same in his/her/their authorized
capacity(ies), and that by his/her/their
signature(s) on the instrument the person(s),
or the entity upon behalf of which the person(s)
acted, executed the instrument.



Witness my hand and official seal.

Kimberly L. Merriam
SIGNATURE OF NOTARY

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to unauthorized document.

THIS CERTIFICATE
MUST BE ATTACHED
TO THE DOCUMENT
DESCRIBED AT RIGHT:

Title or Type of Document Quitclaim Deed

Date of Document 3-9-94

Number of Pages 1

Signer(s) Other Than Named Above _____

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of John Schilstra the 6th day
of April 1994 at 3:01 o'clock P.M., and duly recorded in Vol. M94
of Deeds on Page 10222.

FEE \$35.00

Evelyn Biehn • County Clerk
By Rosanne Mullender

CAPACITY CLAIMED BY SIGNER

- INDIVIDUAL(S)
 CORPORATE _____
OFFICER(S) _____
 PARTNER(S)
 ATTORNEY-IN-FACT
 TRUSTEE(S)
 SUBSCRIBING WITNESS
 GUARDIAN/CONSERVATOR
 OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

CAPACITY CLAIMED BY SIGNER

- INDIVIDUAL(S)
 CORPORATE _____
OFFICER(S) _____
 PARTNER(S)
 ATTORNEY-IN-FACT
 TRUSTEE(S)
 SUBSCRIBING WITNESS
 GUARDIAN/CONSERVATOR
 OTHER: _____

SIGNER IS REPRESENTING:
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